# Assessment Reporting Guidelines

## **Assessment Reports**

- 1. Content of the report should reflect the purpose of the evaluation or assessment. For example, the evaluation was conducted to help determine eligibility, whereas the assessment was conducted to assist in IFSP planning.
- 2. Reports must be written with sensitivity because they will be available to family members. This does not mean that issues should be ignored but that the conclusions should be described, qualified, and supported by the information that was obtained.
- 3. Personal comments are inappropriate.
- 4. In general, a written report should:
  - Be accurate, clear, objective, and detailed
  - Be free of jargon and terms that are subject to misinterpretation
  - Be readable by families and other professionals
  - Contain content that reflects the function for which it is intended to be used
  - Function as a means to communicate with other team members and professionals, including family members, specifying the best estimation of a child's abilities at a given point
  - Serve as a record against which later performance can be compared.

# Reporting Data

### How to report data from evaluation and assessment activities

- The report should be *clearly stated* and *match the purpose* of the conducted activities. For example, an eligibility report will look different than an assessment report because different procedures and tools were used.
- Although there are numerous formats that exist, some types of information are important to include.

The following format provides the opportunity for the organization of reporting evaluation /assessment information.

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# SAMPLE TEMPLATE Evaluation/Assessment Report

## 1. Identifying information

• Name, date of birth, date, chronological age, place of evaluation, evaluator(s).

#### 2. Reason for referral

• Record who made the referral, the reasons for the referral, and the areas of concern.

# 3. Background information

- **a. Developmental information** significant developmental information as reported by the family or referral source.
- b. Health status based on review of pertinent records and medical history - summarize pertinent records related to the child's health status and medical history. If records were not available, please note at the time.
- c. Other evaluations and services note the type and dates of evaluations and services, which have been provided to the child. Record any disability or medical condition, which has been identified previously. Report the services that have been provided to the family if they are related to enhancing the development of the child.

#### 4. Discuss questions to be addressed in the evaluation or assessment

a. List the questions to be addressed during the evaluation or assessment activity. These questions may have been generated by the family members, the Intake or Service Coordinator, or others who have an interest in the child's development.

#### **Examples**

This (evaluation or assessment) is being conducted to answer the following questions:

•	ls	eligible for early interven	ition services?
•	Does	have a disability or developmental delay?	
•	What are		
•	What are	's individual strengths	and needs?
•	What are the	possible strategies for	's success in daily
	routines?		

## 5. Discuss individual child strengths and developmental status

• In family friendly language, list the tool(s) that were used and indicate the purpose of the tool.

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- Include information from formal tests, informal assessments, clinical observation, and family members.
- Information may be across multiple domains or domain specific, depending upon the individual(s) who is/are writing the report.
- Record observations and information from all members including the family and report what the child can do or what he is beginning to do.
- If the purpose of the report is evaluation of eligibility, the information in this section should assist in determining if the child is a child with a disability or developmental delay and if he/she is eligible for early intervention (EI) services. Typically, the section will contain scores. However, remember that scores should not stand-alone. Descriptive information should accompany scores.
- If the purpose of the report is assessment for LFSP planning/intervention planning, this section should contain information that will assist the LFSP team in developing outcomes. For example, the information should describe what the child is beginning to do, areas of need, and what strategies might be appropriate to target areas of need.

# 6. Information regarding daily routines, if obtained

- This area may include additional information on the child's daily routines that was provided by the family during the pre-evaluation or family assessment phase.
- This information should NOT be a duplication of information in the adaptive areas of a report.

#### 7. Summary and recommendations

- This section should summarize the information within the context of the report. Discussing the child's strengths and needs based upon results. The report should indicate if services are warranted. Specific recommendations related to frequency, intensity of services are not appropriate at this time and should not appear in this report.
- If the purpose of the activity was assessment for IFSP planning, the professional should provide strategies or activities that could be incorporated into the IFSP to support the process of developing child/family outcomes.

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# Communicating Findings

The following points should be considered in discussing evaluation and assessment information with families:

- Discuss information with families as quickly as possible after the child's needs are suspected or formally identified.
- Use the primary language and communication style of the family, and ensure that terminology is clear and understandable.
- Set aside sufficient time for families and professionals to present information, ask questions, and provide emotional support.
- Provide families with an opportunity to decide on the appropriate family
  members and professional to include in assessment conferences. Scheduling
  should allow for the participation of these designated members.
- Honor family preferences for the amount of information that can be absorbed in one meeting. Continuing family-professional feedback sessions are sometimes necessary.
- Provide complete, unbiased information to families about their child's strengths and needs. Remember to discuss family needs and look for hope and encouragement.
- Oral reports should always be followed by written reports.
- Professionals must respect issues of confidentiality and parental access.
   Families need to have access to the same information as the other individuals who are conducting and coordinating the evaluation and assessment.

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